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## \*BIBDATASHEET\*

CONFIRMATION NO. 1765

Bib Data Sheet

SERIAL NUMBER 10/800,320	FILING OR 371(c) DATE 03/11/2004 RULE	CLASS 356	GROUP ART UNIT 2877	ATTORNEY DOCKET NO. CC-0734
<b>APPLICANTS</b> John A. Moon, Wallingford, CT; James S. Sirkis, Wallingford, CT; Ralph Jones, Guilford, CT; Charles R. Winston, Glastonbury, CT; David R. Fournier, Ashford, CT; Joseph Pinto, Wallingford, CT; Robert N. Brucato, Southington, CT; James R. Dunphy, South Glastonbury, CT; Christopher J. Chestnut, Ellington, CT;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/454,184 03/11/2003 and is a CIP of 10/159,370 05/31/2002 which claims benefit of 60/295,459 06/01/2001 and claims benefit of 60/351,824 01/24/2002 and claims benefit of 60/364,420 03/16/2002				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 05/28/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		STATE OR COUNTRY CT	SHEETS DRAWING 23	TOTAL CLAIMS 29
Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 3		
<b>ADDRESS</b> 68653				
<b>TITLE</b> OPTICAL SPECTRUM ANALYZER				
<b>FILING FEE RECEIVED</b> 1687	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	